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**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

**A** For the **2009** calendar year, or tax year beginning and ending

**B** Check if applicable:  Address change,  Name change,  Initial return,  Terminated,  Amended return,  Application pending

Please use IRS label or print or type: **C** Name of organization: **GIFFORD YOUTH ACTIVITY CENTER FOUNDATION, INC.**  
Doing Business As: \_\_\_\_\_  
Number and street (or P.O. box if mail is not delivered to street address) Room/suite: **4875 43RD AVENUE**  
City or town, state or country, and ZIP + 4: **VERO BEACH, FL 32967**

See Specific Instructions: **F** Name and address of principal officer: **CARTER W. HOPKINS**  
**SAME AS C ABOVE**

**D** Employer identification number: **43-1950913**

**E** Telephone number: **(772) 567-1151**

**G** Gross receipts \$: **1,187,512.**

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶ \_\_\_\_\_

**I** Tax-exempt status:  501(c) ( **3** ) ◀ (insert no)  4947(a)(1) or  527

**J** Website: ▶ **N/A**

**K** Form of organization:  Corporation  Trust  Association  Other ▶ \_\_\_\_\_

**L** Year of formation: **2001** **M** State of legal domicile: **FL**

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities. **THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS TO RAISE AND MAINTAIN AN ENDOWMENT FUND FOR THE**

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

**3** Number of voting members of the governing body (Part VI, line 1a) **3** **11**

**4** Number of independent voting members of the governing body (Part VI, line 1b) **4** **10**

**5** Total number of employees (Part V, line 2a) **5** **0**

**6** Total number of volunteers (estimate if necessary) **6** **0**

**7a** Total gross unrelated business revenue from Part VIII, column (C), line 12 **7a** **0.**

**b** Net unrelated business taxable income from Form 990-T, line 34 **7b** **0.**

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)		<b>17,304.</b>
<b>9</b> Program service revenue (Part VIII, line 2g)		
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)		<b>&lt;17,552.&gt;</b>
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<b>301,811.</b>
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		<b>301,563.</b>

<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		<b>41,181.</b>
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ _____		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		<b>190,416.</b>
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		<b>231,597.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12		<b>69,966.</b>

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	<b>1,511,716.</b>	<b>1,577,551.</b>
<b>21</b> Total liabilities (Part X, line 26)	<b>8,879.</b>	<b>4,748.</b>
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>1,502,837.</b>	<b>1,572,803.</b>

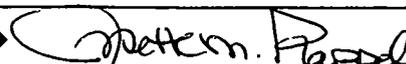
**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here:  Signature of officer Date: **11/3/10**

**CARTER W. HOPKINS**  
Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature:  Date: **10/27/10** Check if self-employed  Preparer's identifying number (see instructions): \_\_\_\_\_

Firm's name (or yours if self-employed), address, and ZIP + 4: **MORGAN, JACOBY, THURN, BOYLE & ASSOC PA**  
**700 20TH ST**  
**VERO BEACH, FL 32960**

EIN ▶ \_\_\_\_\_ Phone no. ▶ **(772) 562-4158**

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

**SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION**

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SCANNED NOV 29 2010

GIFFORD YOUTH ACTIVITY CENTER FOUNDATION

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission.

SEE RESPONSE TO FORM 990, PAGE 1, LINE 1.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code: ) (Expenses \$ 212,783. including grants of \$ ) (Revenue \$ )

TO RAISE AND MAINTAIN AN ENDOWMENT FUND FOR THE GIFFORD YOUTH ACTIVITY CENTER, INC., AN EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, ID# 43-1950911

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses \$ 212,783.

**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION**

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**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i>	X	
	<ul style="list-style-type: none"> <li>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i></li> <li>• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i></li> <li>• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i></li> <li>• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i></li> <li>• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i></li> <li>• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X</i></li> </ul>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

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**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION**

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	X	

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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10b	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		X
12b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official		X
15b	b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed ► NONE
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ►  
TOMAS RENE PEREZ - (772) 567-1151  
4875 43RD AVENUE, VERO BEACH, FL 32967

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CARTER W. HOPKINS CHAIRMAN		X		X			0.	0.	0.	
A. RONALD HUDSON VICE CHAIRMAN		X		X			0.	0.	0.	
TOMAS RENE PEREZ SECRETARY/TREASURER		X		X			0.	0.	0.	
SAMUEL BLOCK BOARD MEMBER		X					0.	0.	0.	
NANCY JOHNSON BOARD MEMBER		X					0.	0.	0.	
JOAN WOODHOUSE BOARD MEMBER		X					0.	0.	0.	
WILLIAM GLAVIN BOARD MEMBER		X					0.	0.	0.	
MARY BABCOCK BOARD MEMBER		X					0.	0.	0.	
ANDREW WHITE BOARD MEMBER		X					0.	0.	0.	
BARRY REARDON BOARD MEMBER		X					0.	0.	0.	
ROBERT SAMUELS BOARD MEMBER		X					0.	0.	0.	



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**Part VIII Statement of Revenue**

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	17,304.			
	g Noncash contributions included in lines 1a-1f \$		1,055.			
	h Total. Add lines 1a-1f		17,304.			
	Program Service Revenue	2 a _____	Business Code			
b _____						
c _____						
d _____						
e _____						
f All other program service revenue						
g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		46,562.		46,562.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	821,835.			
		(ii) Other				
		b Less cost or other basis and sales expenses	885,949.			
		c Gain or (loss)	<64,114.>			
	d Net gain or (loss)		<64,114.>		<64,114.>	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
		b Less direct expenses	b			
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities See Part IV, line 19	a					
	b Less. direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a UNREALIZED GAIN ON INV	900099	301,811.			301,811.	
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d		301,811.				
12 Total revenue. See instructions.		301,563.	0.	0.	284,259.	

**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION**

Form 990 (2009)

, INC.

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.  
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	41,181.	39,122.	2,059.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	3,250.		3,250.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	212.	212.		
13 Office expenses	13,699.	13,014.	685.	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates	160,435.	160,435.		
22 Depreciation, depletion, and amortization	836.		836.	
23 Insurance	936.		936.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <b>INVESTMENT ADVISORY FEE</b>	9,279.		9,279.	
b <b>MAINTENANCE CONTRACTS</b>	1,035.		1,035.	
c <b>TAXES AND LICENSES</b>	734.		734.	
d _____				
e _____				
f All other expenses _____				
25 Total functional expenses. Add lines 1 through 24f	231,597.	212,783.	18,814.	0.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION  
INC.**

Form 990 (2009)

43-1950913 Page 11

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	12,978.	1	12,978.	
	2	294,708.	2	193,910.	
	3	30,000.	3		
	4		4		
	5		5		
	6		6		
	7		7		
	8		8		
	9		9		
	10a	5,063.			
	10b	3,807.	2,093.	10c	1,256.
	11		1,171,937.	11	1,369,407.
	12			12	
	13			13	
	14			14	
	15			15	
16		1,511,716.	16	1,577,551.	
<b>Liabilities</b>	17		17		
	18		18		
	19		19		
	20		20		
	21		21		
	22		22		
	23		23		
	24		24		
	25	8,879.	25	4,748.	
	26	8,879.	26	4,748.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	802,828.	27	872,794.	
	28		28		
	29	700,009.	29	700,009.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30		30		
	31		31		
	32		32		
33	1,502,837.	33	1,572,803.		
34	1,511,716.	34	1,577,551.		

Form 990 (2009)

**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION**

Form 990 (2009)

, INC.

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**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990. <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant?		<b>X</b>
<b>b</b>	Were the organization's financial statements audited by an independent accountant?		<b>X</b>
<b>c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
<b>d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		<b>X</b>
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form **990** (2009)



**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION**

Schedule A (Form 990 or 990-EZ) 2009, **INC.**

43-1950913 Page 2

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	404,443.	268,266.	278,542.	81,244.	17,305.	1049800.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	404,443.	268,266.	278,542.	81,244.	17,305.	1049800.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						596,880.
6 Public support. Subtract line 5 from line 4						452,920.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	404,443.	268,266.	278,542.	81,244.	17,305.	1049800.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	30,041.	52,599.	68,707.	59,798.	46,562.	257,707.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						1307507.
12 Gross receipts from related activities, etc (see instructions)					12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	34.64 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	37.99 %

16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

**Part III Support Schedule for Organizations Described in Section 509(a)(2)** (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12)						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <span style="float: right;">▶ <input type="checkbox"/></span>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	<b>18</b>	%

- 19a 33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2009**  
Open to Public Inspection

Name of the organization **GIFFORD YOUTH ACTIVITY CENTER FOUNDATION, INC.**

Employer identification number  
**43-1950913**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items.
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_
- b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION**

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,415,758.	1,950,311.			
b Contributions					
c Net investment earnings, gains, and losses	304,171.	<439,845.>			
d Grants or scholarships					
e Other expenditures for facilities and programs	<159,641.>	<94,708.>			
f Administrative expenses					
g End of year balance	1,560,288.	1,415,758.			

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ 55.00 %
- b Permanent endowment ▶ 45.00 %
- c Term endowment ▶ .00 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		5,063.	3,807.	1,256.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,256.



**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION  
INC.**

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4: THESE PERMANENT AND BOARD DESIGNATED ENDOWMENT FUNDS**

**ARE MAINTAINED AND AVAILABLE FOR THE SOLE USE OF THE GIFFORD YOUTH**

**ACTIVITY CENTER, INC.**

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**SCHEDULE O**

(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization	GIFFORD YOUTH ACTIVITY CENTER FOUNDATION , INC.	Employer identification number	43-1950913
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

GIFFORD YOUTH ACTIVITY CENTER, INC., AN EXEMPT ORGANIZATION UNDER  
SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, ID#: 43-1950911.

FORM 990, PART VI, SECTION B, LINE 11: THE RETURN IS REVIEWED AND APPROVED  
BY THE CHAIRMAN OF THE BOARD AND THE TREASURER AND MADE AVAILABLE TO ALL  
MEMBERS OF THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING  
DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE FOR PUBLIC INSPECTION UPON  
REQUEST. THE ORGANIZATION DOES NOT HAVE A WRITTEN CONFLICT OF INTEREST  
POLICY, HOWEVER, IT PLANS TO IMPLEMENT ONE IN 2010. ALL TAX RETURNS FOR  
THE ORGANIZATION ARE ALSO AVAILABLE ON GUIDESTAR.

FORM 990, PART VI, SECTION B, LINE 12A

CONFLICT OF INTEREST POLICY

THE GIFFORD YOUTH ACTIVITY CENTER FOUNDATION, INC. DOES NOT CURRENTLY  
HAVE A WRITTEN CONFLICT OF INTEREST POLICY BUT THE BOARD OF TRUSTEES IS  
PLANNING TO IMPLEMENT THIS POLICY IN 2010.

FORM 990, PART VI, SECTION B, LINE 13

WHISTLEBLOWER POLICY

THE GIFFORD YOUTH ACTIVITY CENTER FOUNDATION, INC. DOES NOT CURRENTLY  
HAVE A WRITTEN WHISTLEBLOWER POLICY BUT THE BOARD OF TRUSTEES IS  
PLANNING TO IMPLEMENT THIS POLICY IN 2010.

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No 1545-0047

**2009**  
Open to Public  
Inspection

Name of the organization GIFFORD YOUTH ACTIVITY CENTER FOUNDATION  
, INC. Employer identification number  
43-1950913

FORM 990, PART VI, SECTION B, LINE 14

DOCUMENT RETENTION POLICY

THE GIFFORD YOUTH ACTIVITY CENTER FOUNDATION, INC. DOES NOT CURRENTLY  
HAVE A WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY BUT THE BOARD  
OF TRUSTEES IS PLANNING TO IMPLEMENT THIS POLICY IN 2010.

FORM 990, SCHEDULE R, PART V, LINE 2, ITEM (2)

INCLUDED IN TRANSACTION TYPE "Q" AMOUNT OF \$145,111 ARE STOCK DONATIONS  
MADE TO THE CENTER THAT WERE PROCESSED "AS AGENT" BY THE FOUNDATION.  
THIS AMOUNT INCLUDES TWO LARGE ANONYMOUS STOCK DONATIONS THAT WERE  
PROVIDED TO THE CENTER VIA THE FOUNDATION TO RETAIN THEIR ANONYMONITY.  
DURING 2009, THE CENTER DID NOT HAVE THEIR OWN MARKETABLE SECURITIES  
ACCOUNT, THEREFORE THE STOCK TRANSACTIONS WERE PROCESSED THROUGH THE  
FOUNDATION WITH PROCEEDS TRANSFERRED TO THE CENTER. DURING 2010 THE  
CENTER PLANS TO OPEN THEIR OWN BROKERAGE ACCOUNT FOR SUCH INSTANCES.





**GIFFORD YOUTH ACTIVITY CENTER FOUNDATION  
INC.**

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1)	GIFFORD YOUTH ACTIVITY CENTER, INC.	B	160,435.
(2)	GIFFORD YOUTH ACTIVITY CENTER, INC.	Q	145,111.
(3)			
(4)			
(5)			
(6)			



2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	MANAGEMENT AND GENERAL											
1	COMPUTER EQUIPMENT	042208	200DB5	5.00	17	970.		485.	485.	97.		155.
2	PRINTER	042208	200DB5	5.00	17	53.		27.	26.	5.		8.
3	SOFTWARE	042208	SL	3.00	17	350.		175.	175.	29.		58.
4	SOFTWARE	060108	SL	3.00	17	3,690.		1,845.	1,845.	308.		615.
	* 990 PAGE 10 TOTAL					5,063.		2,532.	2,531.	439.	0.	836.
	* GRAND TOTAL, 990					5,063.		2,532.	2,531.	439.	0.	836.
	PAGE 10 DEPR											

# 2009 Tax Information Statement

Account Number: 23-43689  
 Recipient's Tax ID number: XX-XXX0913  
 Recipient's Name and Address:  
 GIFFORD YOUTH ACTIVITIES CENTER  
 P.O. BOX 370  
 VERO BEACH, FL 32961-0370

Corrected  2nd TIN notice

NORTHERN TRUST, NA  
 P.O. BOX 803878  
 CHICAGO, IL 60680

## 2009 Proceeds from Broker and Barter Exchange Transactions

Sales are listed at Gross Proceeds less commissions and option premiums.

Number of shares	CUSIP	Description	Date Acquired	Date of Sale	Stocks, Bonds, etc.	Cost or other Basis	Net Gain or Loss	Federal Income Tax Withheld
<b>Short Term Sales</b>								
55,000	760975102	RESEARCH IN MOTION LTD.	05/02/2008	01/26/2009	2,754.57	7,149.88	-4,395.31	0.00
120,000	149123101	CATERPILLAR INC	05/29/2008	02/03/2009	3,637.96	10,048.64	-6,410.68	0.00
266,080	665162723	MFB NORTN FDS SMALL CAP INDEX FD	12/19/2008	03/27/2009	1,250.57	1,407.56	-156.99	0.00
135,000	G2552X108	#REORG/COVIDEN LTD PLAN OF REORG TO COVIDEN PLC SEC # 2052566 EFF 6/4/09	10/02/2008	04/02/2009	4,482.96	7,006.44	-2,523.48	0.00
15,000	021441100	ALTERA CORP.	03/23/2009	08/20/2009	295.29	264.95	20.34	0.00
10,000	023135106	AMAZON COM INC	05/27/2009	08/20/2009	836.08	786.14	49.94	0.00
5,000	088606108	BHP LTD SPONSORED ADR	05/14/2009	08/20/2009	310.74	249.08	61.66	0.00
10,000	237194105	DARDEN RESTAURANTS INC	03/02/2009	08/20/2009	323.69	258.18	65.51	0.00
5,000	38141G104	GOLDMAN SACHS GROUP INC	04/02/2009	08/20/2009	808.68	570.46	238.22	0.00
5,000	500255104	KOHL'S CORP	02/03/2009	08/20/2009	255.69	195.19	60.50	0.00
5,000	61945A107	MOSAIC CO COM	05/27/2009	08/20/2009	268.14	281.77	-13.63	0.00
5,000	655044105	NOBLE ENERGY INC	04/17/2009	08/20/2009	301.99	306.01	-4.02	0.00
1374.9600	665162483	MFB NORTN FDS MULTI-MANAGER EMERGING MKTS EOTY FD	03/27/2009	08/20/2009	24,543.00	16,939.52	7,603.48	0.00
1498.3400	665162699	MFB NORTN HI YIELD FXD INC FD	03/27/2009	08/20/2009	9,799.15	8,825.22	973.93	0.00

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 CHICAGO, IL 60680

Number of shares	CUSIP	Description	Date Acquired	Date of Sale	Stocks Bonds, etc.	Cost or other Basis	Net Gain or Loss	Federal Income Tax Withheld
15.0000	881624209	TEVA PHARMACEUTICALS INDS LTD ADR	03/02/2009	08/20/2009	776.83	655.94	120.89	0.00
3581.0800	922031869	MFO VANGUARD FXD INC SECS FD INC INFLATION-PROTECTED SECS FD #119	12/18/2008	08/20/2009	44,297.97	42,400.00	1,897.97	0.00
20.0000	931142103	WAL MART STORES INC	09/04/2008	08/20/2009	1,027.17	1,210.40	-183.23	0.00
5.0000	G2554F105	COVIDIEN PLC USD0.20	10/02/2008	08/20/2009	200.34	259.50	-59.16	0.00
50.0000	30161N101	EXELON CORP	10/06/2008	09/04/2009	2,420.54	2,833.46	-412.92	0.00
175.0000	G1151C101	ACCENTURE PLC SHS CL A NEW	10/02/2008	09/04/2009	6,070.95	6,367.25	-296.30	0.00
.6900	717081103	PFIZER INC	10/16/2009	11/09/2009	11.60	12.09	-0.49	0.00
140.0000	237194105	DARDEN RESTAURANTS INC	03/02/2009	11/11/2009	4,548.79	3,614.58	934.21	0.00
30.0000	023135108	AMAZON COM INC	05/27/2009	12/09/2009	3,920.90	2,358.42	1,562.48	0.00
20.0000	717081103	PFIZER INC	10/16/2009	12/09/2009	359.99	350.30	9.69	0.00
75.0000	000375204	ABB LTD SPONSORED ADR	10/22/2009	12/28/2009	1,431.71	1,598.61	-166.90	0.00
65.0000	021441100	ALTERA CORP	03/23/2009	12/28/2009	1,482.61	1,148.10	334.51	0.00
20.0000	023135106	AMAZON.COM INC	VARIOUS	12/28/2009	2,826.53	1,563.45	1,263.08	0.00
25.0000	088606108	BHP LTD SPONSORED ADR	05/14/2009	12/28/2009	1,912.45	1,245.41	667.04	0.00
35.0000	126650100	CVS CORP	08/20/2009	12/28/2009	1,136.07	1,223.85	-87.78	0.00
55.0000	231021106	CUMMINS ENGINE INC	09/04/2009	12/28/2009	2,612.43	2,560.38	52.05	0.00
20.0000	31428X106	FEDEX CORP	12/09/2009	12/28/2009	1,658.76	1,771.40	-112.64	0.00
370.0000	369804103	GENERAL ELECTRIC CO	08/20/2009	12/28/2009	5,653.46	5,120.80	532.66	0.00
25.0000	38141G104	GOLDMAN SACHS GROUP INC	04/02/2009	12/28/2009	4,118.14	2,852.29	1,265.85	0.00

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5.0000	38259P508	GOOGLE INC CL A	05/27/2009	12/28/2009	3,118.07	2,043.82	1,074.25	0.00
95.0000	478366107	JOHNSON CONTROLS INC	09/10/2009	12/28/2009	2,637.13	2,529.26	107.87	0.00
30.0000	500255104	KOHL'S CORP.	02/03/2009	12/28/2009	1,655.06	1,171.16	483.90	0.00
45.0000	581550103	MCKESSON HBOC INC	12/09/2009	12/28/2009	2,835.38	2,735.55	99.83	0.00
30.0000	61945A107	MOSAIC CO COM	05/27/2009	12/28/2009	1,833.55	1,690.62	142.93	0.00
25.0000	654106103	NIKE INC CLASS B	12/09/2009	12/28/2009	1,625.96	1,553.20	72.76	0.00
20.0000	655044105	NOBLE ENERGY INC	04/17/2009	12/28/2009	1,456.96	1,224.04	232.92	0.00
237.3200	665162483	MFB NORTHN FDS MULTI-MANAGER EMERGING MKTS.EQTY.FD	VARIOUS	12/28/2009	4,808.00	3,973.02	834.98	0.00
2115.5400	665162699	MFB NORTHN HI.YIELD FXD INC FD	03/27/2009	12/28/2009	14,703.00	12,460.53	2,242.47	0.00
45.0000	747525103	QUALCOMM INC	09/04/2009	12/28/2009	2,069.95	2,049.76	20.19	0.00
60.0000	881624209	TEVA PHARMACEUTICALS INDS LTD ADR	03/02/2009	12/28/2009	3,367.71	2,623.78	743.93	0.00
60.0000	89417E109	TRAVELERS COS INC COM STK	11/11/2009	12/28/2009	2,984.92	3,259.33	-274.41	0.00
70.0000	91324P102	UNITEDHEALTH GROUP INC	12/23/2009	12/28/2009	2,183.94	2,212.70	-28.76	0.00
<b>Total Short Term Sales</b>					<b>181,605.37</b>	<b>172,962.04</b>	<b>8,643.33</b>	<b>0.00</b>
<b>Long Term 15% Sales</b>								
50000.0000	31359MEK5	FEDERAL NATL MTG ASSN BCHMK NT DTD 01/11/99 5.25% 01/15/2009	01/23/2007	01/15/2009	50,000.00	50,182.70	-182.70	0.00
90.0000	3016JN101	EXELON CORP.	12/13/2006	01/26/2009	5,113.69	5,612.40	-498.71	0.00

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Number of shares	CUSIP	Description	Date Acquired	Date of Sale	Stocks Bonds, etc.	Cost or other Basis	Net Gain or Loss	Federal Income Tax Withheld
1546.2000	665162541	MFB NORTHERN FDS GLOBAL REAL ESTATE INDEX.FD.	04/25/2007	02/03/2009	7,128.00	20,116.05	-12,988.05	0.00
75.0000	580135101	MCDONALDS CORP.	09/11/2006	03/02/2009	3,909.03	2,802.66	1,106.37	0.00
110.0000	941848103	WATERS CORP.	04/25/2007	03/02/2009	3,708.07	6,551.60	-2,843.53	0.00
135.0000	001055102	AFLAC INC	10/24/2007	03/23/2009	2,771.31	8,085.15	-5,313.84	0.00
75.0000	478160104	JOHNSON & JOHNSON	11/03/2006	03/23/2009	3,918.96	5,094.27	-1,175.31	0.00
100.0000	774341101	ROCKWELL COLLINS INC	06/08/2007	03/23/2009	3,255.16	6,872.28	-3,617.12	0.00
3283.9300	665162582	MFB NORTHERN EMERGING MARKETS EQUITY FUND	VARIOUS	03/27/2009	21,805.31	33,381.34	-11,576.03	0.00
1915.3300	665162723	MFB NORTHN FDS SMALL CAP INDEX FD	VARIOUS	03/27/2009	9,002.03	21,444.78	-12,442.75	0.00
80.0000	713448108	PEPSICO INC	VARIOUS	04/02/2009	4,249.29	5,028.45	-779.16	0.00
95.0000	002824100	ABBOTT LABORATORIES	VARIOUS	04/17/2009	4,121.70	5,168.08	-1,046.38	0.00
50.0000	166764100	CHEVRONTXACO CORP	01/16/2007	04/17/2009	3,317.97	3,500.75	-182.78	0.00
175.0000	G1150G11	ACCENTURE LTD BERMUDA CL A	11/03/2006	04/17/2009	4,753.11	5,798.88	-1,045.77	0.00
150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS		04/30/2009	4.43	452	-0.09	0.00
30.0000	166764100	CHEVRONTXACO CORP	01/16/2007	05/14/2009	2,034.12	2,100.45	-66.33	0.00
20.0000	30231G102	EXXON MOBIL CORP	12/19/2003	05/14/2009	1,392.37	794.00	598.37	0.00
85.0000	742718109	PROCTER & GAMBLE CO	VARIOUS	05/14/2009	4,340.87	4,347.60	-6.73	0.00
140.0000	075887109	BECTON DICKINSON & CO	12/13/2006	05/27/2009	9,409.72	10,204.19	-794.47	0.00
40.0000	459200101	INTL BUSINESS MACHINES CORP	05/02/2008	05/27/2009	4,177.13	4,921.14	-744.01	0.00

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P.O. BOX 370

Corrected

2nd TIN notice

VERO BEACH, FL 32961-0370

NORTHERN TRUST, NA  
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CHICAGO, IL 60680

Number of shares	CUSIP	Description	Date Acquired	Date of Sale	Stocks, Bonds, etc.	Cost or other Basis	Net Gain or Loss	Federal Income Tax Withheld
185.0000	595017104	MICROCHIP TECHNOLOGY INC	01/16/2007	05/27/2009	4,036.69	6,673.30	-2,636.61	0.00
250.0000	808513105	CHARLES SCHWAB CORP NEW	05/15/2008	05/27/2009	4,325.39	5,619.67	-1,294.28	0.00
25000.0000	02003MAA2	ALLSTATE LIFE GLOBAL FDG SECD MEDIUM TERM TN 4.5 DUE 05-29-2009	06/07/2005	05/29/2009	25,000.00	25,393.75	-393.75	0.00
150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS		05/31/2009	4.36	4.43	-0.07	0.00
150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS		06/30/2009	4.36	4.19	.17	0.00
150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS		07/31/2009	4.37	4.33	.04	0.00
10.0000	0028224100	ABBOTT LABORATORIES	02/13/2007	08/20/2009	453.19	527.50	-74.31	0.00
20.0000	00724F101	ADOBE SYS INC	01/08/2008	08/20/2009	638.18	795.92	-157.74	0.00
10.0000	009158106	AIR PRODUCTS & CHEMICALS INC	12/13/2007	08/20/2009	742.58	1,025.19	-282.61	0.00
5.0000	037833100	APPLE COMPUTER INC	01/24/2006	08/20/2009	828.83	389.90	438.93	0.00
10.0000	071813109	BAXTER INTL INC	02/13/2007	08/20/2009	559.39	498.90	60.49	0.00
10.0000	166764100	CHEVRONTEXACO CORP	01/16/2007	08/20/2009	683.18	700.15	-16.97	0.00
50.0000	17275R102	CISCO SYS INC	01/22/2007	08/20/2009	1,073.00	1,332.00	-259.00	0.00
10.0000	22160K105	COSTCO WHSL CORP NEW	01/23/2008	08/20/2009	477.19	667.52	-190.33	0.00
10.0000	235851102	DANAHER CORP	01/08/2003	08/20/2009	604.08	329.75	274.33	0.00
15.0000	254687106	WALT DISNEY CO	04/25/2007	08/20/2009	387.44	519.71	-132.27	0.00
15.0000	291011104	EMERSON ELECTRIC CO	01/16/2007	08/20/2009	521.99	664.01	-142.02	0.00
5.0000	30161N101	EXELON CORP	12/13/2006	08/20/2009	244.64	311.80	-67.16	0.00
15.0000	30231G102	EXXON MOBIL CORP	12/19/2003	08/20/2009	1,024.32	595.50	428.82	0.00

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5,0000	302571104	FPL GROUP INC	07/29/2008	08/20/2009	285.19	319.15	-33.96	0.00
25000.0000	31359MXH1	FNMA PREASSIGN 00400 3.875 02-15-2010	02/09/2005	08/20/2009	25,430.48	24,882.98	547.50	0.00
50000 0000	377372AC1	GLAXOSMITHKLINE 4.85% DUE 05-15-2013 BEO	05/29/2008	08/20/2009	53,250.50	49,816.00	3,434.50	0.00
20,0000	428236103	HEWLETT PACKARD CO COM	12/13/2006	08/20/2009	873.58	794.80	78.78	0.00
10,0000	450911102	ITT INDS. INC	01/16/2007	08/20/2009	494.59	597.36	-102.77	0.00
10,0000	459200101	INTL BUSINESS MACHINES CORP	08/11/2008	08/20/2009	1,185.57	1,278.22	-92.65	0.00
35,0000	46625H100	J.P. MORGAN CHASE & CO	01/31/2008	08/20/2009	1,476.26	1,657.96	-181.70	0.00
10,0000	469814107	JACOBS ENGR GROUP INC	07/13/2007	08/20/2009	453.29	646.64	-193.35	0.00
10,0000	478160104	JOHNSON & JOHNSON	11/03/2006	08/20/2009	608.08	679.23	-71.15	0.00
15,0000	487836108	KELLOGG CO	04/25/2007	08/20/2009	699.58	791.55	-91.97	0.00
10,0000	580135101	MCDONALDS CORP	09/11/2006	08/20/2009	559.89	373.69	186.20	0.00
15,0000	58405U102	MEDCO HEALTH SOLUTIONS INC	02/13/2007	08/20/2009	823.11	450.62	372.49	0.00
30,0000	594918104	MICROSOFT CORP COM	12/13/2007	08/20/2009	706.18	1,060.10	-353.92	0.00
10,0000	637071101	NATIONAL-OILWELL INC	04/25/2007	08/20/2009	378.69	401.95	-23.26	0.00
403 0300	665130100	MFB NORTHN MID CAP INDEX FD	VARIOUS	08/20/2009	3,454.00	4,552.65	-1,098.65	0.00
1142.4600	665162566	MFB NRTN MULTIMGR SMALL-FOR NMMMSX FD	06/22/2006	08/20/2009	8,557.00	11,424.60	-2,867.60	0.00
5961.7500	665162599	MFB NORTHN HI YIELD FXD INC FD	VARIOUS	08/20/2009	38,989.85	46,564.10	-7,574.25	0.00
15,0000	69331C108	PG&E CORP	06/01/2007	08/20/2009	599.38	741.80	-142.42	0.00

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15.0000	713448108	PEPSICO INC	11/03/2005	08/20/2009	854.98	885.60	-30.62	0.00
105.0000	742718109	PROCTER & GAMBLE CO	02/09/2004	08/20/2009	5,546.22	5,350.28	195.94	0.00
10.0000	806857108	SCHLUMBERGER LTD ISIN #AN8068571086	04/25/2007	08/20/2009	534.69	752.90	-218.21	0.00
30.0000	808513105	CHARLES SCHWAB CORP NEW	05/15/2008	08/20/2009	532.19	674.36	-142.17	0.00
10.0000	826552101	SIGMA ALDRICH CORP	01/23/2008	08/20/2009	509.59	476.00	33.59	0.00
35.0000	847560109	SPECTRA ENERGY CORP COM STK	08/13/2008	08/20/2009	650.63	909.26	-258.63	0.00
10.0000	867224107	SUNCOR ENERGY INC NEW COM STK	07/13/2007	08/20/2009	318.49	477.49	-159.00	0.00
15.0000	872540109	TJX COS INC NEW	05/02/2008	08/20/2009	526.94	499.54	27.40	0.00
25.0000	902973304	US BANCORP DEL NEW	05/02/2008	08/20/2009	551.49	877.66	-326.17	0.00
5.0000	913017109	UNITED TECHNOLOGIES CORP	02/25/2002	08/20/2009	282.04	175.05	106.99	0.00
30.0000	92343V104	VERIZON COMMUNICATIONS	01/08/2008	08/20/2009	913.78	1,313.97	-400.19	0.00
40.0000	949746101	WELLS FARGO & CO NEW	04/30/2002	08/20/2009	1,102.47	1,028.80	73.67	0.00
15.0000	G1150G111	ACCENTURE LTD BERMUDA CLA	11/03/2006	08/20/2009	543.29	497.05	46.24	0.00
5.0000	H8817H100	TRANSOCEAN LTD	12/13/2006	08/20/2009	376.54	411.80	-35.26	0.00
150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS	VARIOUS	08/31/2009	4.59	4.48	.11	0.00
50.0000	30161N101	EXELON CORP	05/29/2008	09/04/2009	2,420.54	3,026.11	-605.57	0.00
25.0000	336433107	FIRST SOLAR INC COM	11/03/2006	09/04/2009	2,970.67	6,411.02	-3,440.35	0.00
20.0000	G1151C101	ACCENTURE PLC SHS CLA NEW	09/11/2006	09/10/2009	693.82	662.73	31.09	0.00
135.0000	580135101	MCDONALDS CORP	09/11/2006	09/10/2009	7,418.56	5,044.79	2,373.77	0.00

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150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS	VARIOUS	09/30/2009	5.07	4.14	.33	0.00
160.0000	92343V104	VERIZON COMMUNICATIONS	VARIOUS	10/22/2009	4,661.05	5,730.91	-1,069.86	0.00
150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS	VARIOUS	10/31/2009	4.85	4.30	.55	0.00
170.0000	949746101	WELLS FARGO & CO NEW	VARIOUS	11/11/2009	4,899.27	5,496.21	-596.94	0.00
150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS	VARIOUS	11/30/2009	5.20	4.41	.79	0.00
325.0000	191216100	COCA COLA CO	01/01/1980	12/01/2009	18,891.76	18,891.76	0.00	0.00
45.0000	191216100	COCA COLA CO	01/01/1980	12/04/2009	2,569.88	2,569.88	0.00	0.00
165.0000	071813109	BAXTER INTL INC	02/13/2007	12/09/2009	9,187.22	8,231.85	955.37	0.00
130.0000	469814107	JACOBS ENGR GROUP INC	07/13/2007	12/09/2009	4,452.47	8,406.26	-3,953.79	0.00
24.0000	46625H100	J P MORGAN CHASE & CO	01/31/2008	12/10/2009	980.37	980.37	0.00	0.00
115.0000	806857108	SCHLUMBERGER LTD ISIN #AN8068571086	04/25/2007	12/23/2009	7,497.81	8,658.35	-1,160.54	0.00
50.0000	002824100	ABBOTT LABORATORIES	02/13/2007	12/28/2009	2,706.43	2,637.50	68.93	0.00
85.0000	00724F101	ADOBE SYS INC	01/08/2008	12/28/2009	3,172.97	3,382.64	-209.67	0.00
40.0000	009158106	AIR PRODUCTS & CHEMICALS INC	12/13/2007	12/28/2009	3,280.72	4,100.75	-820.03	0.00
25.0000	037833100	APPLE COMPUTER INC	01/24/2006	12/28/2009	5,308.36	1,949.50	3,358.86	0.00
45.0000	166764100	CHEVRONTEXACO CORP	11/17/2008	12/28/2009	3,487.86	3,246.31	241.55	0.00
205.0000	17275R102	CISCO SYS INC	VARIOUS	12/28/2009	4,917.82	4,645.80	272.02	0.00
30.0000	22160K105	COSTCO WHSL CORP NEW	01/23/2008	12/28/2009	1,812.25	2,002.56	-190.31	0.00
50.0000	235851102	DANAHER CORP	10/17/2008	12/28/2009	3,780.90	2,859.26	911.64	0.00

This is important tax information and is being furnished to you.

# 2009 Tax Information Statement

Account Number: 23-43689  
 Recipient's Tax ID number: XX-XXX0913  
 Recipient's Name and Address  
 GIFFORD YOUTH ACTIVITIES CENTER  
 P.O. BOX 370  
 VERO BEACH, FL 32961-0370

Corrected  2nd TIN notice

NORTHERN TRUST, NA  
 P.O. BOX 803878  
 CHICAGO, IL 60680

Number of shares	CUSIP	Description	Date Acquired	Date of Sale	Stocks, Bonds, etc.	Cost or other Basis	Net Gain or Loss	Federal Income Tax Withheld
70.0000	254687106	WALT DISNEY CO	04/25/2007	12/28/2009	2,244.84	2,425.30	-180.46	0.00
70.0000	291011104	EMERSON ELECTRIC CO	01/16/2007	12/28/2009	3,036.52	3,098.73	-62.21	0.00
140.0000	30231G102	EXXON MOBIL CORP	VARIOUS	12/28/2009	9,655.83	7,463.81	2,191.96	0.00
40.0000	302571104	FPL GROUP INC	07/29/2008	12/28/2009	2,132.75	2,553.16	-420.41	0.00
320.0000	369604103	GENERAL ELECTRIC CO	VARIOUS	12/28/2009	4,889.47	10,325.15	-5,435.68	0.00
80.0000	428236103	HEWLETT PACKARD CO COM	12/13/2006	12/28/2009	4,213.49	3,179.20	1,034.29	0.00
55.0000	450911102	ITT INDS INC	01/16/2007	12/28/2009	2,776.88	3,285.46	-508.58	0.00
35.0000	459200101	INTL BUSINESS MACHINES CORP	VARIOUS	12/28/2009	4,611.83	4,464.65	147.18	0.00
135.0000	46625H100	J P MORGAN CHASE & CO	VARIOUS	12/28/2009	5,650.95	5,580.33	70.62	0.00
50.0000	478160104	JOHNSON & JOHNSON	VARIOUS	12/28/2009	3,243.42	2,546.42	697.00	0.00
60.0000	487838108	KELLOGG CO	04/25/2007	12/28/2009	3,227.32	3,166.20	61.12	0.00
65.0000	58405U102	MEDCO HEALTH SOLUTIONS INC	02/13/2007	12/28/2009	4,181.99	1,952.70	2,229.29	0.00
130.0000	594918104	MICROSOFT CORP COM	12/13/2007	12/28/2009	4,023.40	4,593.79	-570.39	0.00
45.0000	637071101	NATIONAL-OILWELL INC	04/25/2007	12/28/2009	2,025.85	1,808.77	217.08	0.00
2642.0800	665130100	MFB NORTHN MID CAP INDEX FD	04/21/2005	12/28/2009	25,681.00	25,548.91	132.09	0.00
8186.7800	665130209	MFB NORTHN INTL EQTY INDEX FD	VARIOUS	12/28/2009	82,359.00	81,288.31	1,070.69	0.00
60.0000	69331C108	PG&E CORP	06/01/2007	12/28/2009	2,730.53	2,967.21	-236.68	0.00
50.0000	713448108	PEPSICO INC	11/03/2005	12/28/2009	3,055.42	2,952.02	103.40	0.00
40.0000	742718109	PROCTER & GAMBLE CO	02/09/2004	12/28/2009	2,433.14	2,038.20	394.94	0.00
135.0000	808513105	CHARLES SCHWAB CORP NEW	09/04/2008	12/28/2009	2,557.17	3,203.93	-646.76	0.00

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# 2009 Tax Information Statement

Account Number: 23-43689  
 Recipient's Tax ID number: XX-XXX0913

Recipient's Name and Address  
 GIFFORD YOUTH ACTIVITIES CENTER  
 P.O. BOX 370  
 VERO BEACH, FL 32961-0370

Corrected  2nd TIN notice

NORTHERN TRUST, NA  
 P.O. BOX 803878  
 CHICAGO, IL 60680

Number of shares	CUSIP	Description	Date Acquired	Date of Sale	Stocks, Bonds, etc.	Cost or other Basis	Net Gain or Loss	Federal Income Tax Withheld
35.0000	826552101	SIGMA ALDRICH CORP	01/23/2008	12/28/2009	1,789.50	1,666.00	123.50	0.00
150.0000	847560109	SPECTRA ENERGY CORP COM STK	08/13/2008	12/28/2009	3,067.42	3,896.84	-829.42	0.00
45.0000	867224107	SUNCOR ENERGY INC NEW COM STK	07/13/2007	12/28/2009	1,616.41	2,148.72	-532.31	0.00
50.0000	872540109	TJX COS INC NEW	05/02/2008	12/28/2009	1,842.45	1,665.15	177.30	0.00
105.0000	902973304	US BANCORP DEL NEW	05/02/2008	12/28/2009	2,363.60	3,686.16	-1,322.56	0.00
30.0000	913017109	UNITED TECHNOLOGIES CORP	02/25/2002	12/28/2009	2,105.05	1,050.30	1,054.75	0.00
70.0000	92343V104	VERIZON COMMUNICATIONS	11/03/2006	12/28/2009	2,344.24	2,470.03	-125.79	0.00
80.0000	931142103	WAL MART STORES INC	09/04/2008	12/28/2009	4,292.69	4,841.61	-548.92	0.00
110.0000	949746101	WELLS FARGO & CO NEW	04/30/2002	12/28/2009	2,946.00	2,829.20	116.80	0.00
30.0000	G2554F105	COVIDIEN PLC USD0.20	10/02/2008	12/28/2009	1,454.66	1,556.99	-102.33	0.00
20.0000	H8817H100	TRANSOCEAN LTD	12/13/2006	12/28/2009	1,699.36	1,647.20	52.16	0.00
150.0000	78463V107	MFC SPDR GOLD TR GOLD SHS		12/31/2009	5.23	4.00	1.23	0.00
21.0000	983024100	WYETH LABS	09/03/2009	10/16/2009	1,055.39	996.14	59.25	0.00
5.0000	12572Q105	CME GROUP INC COM STK	12/18/2009	12/28/2009	1,691.96	1,691.96	0.00	0.00
<b>Total Long Term Sales</b>					<u>640,229.21</u>	<u>712,987.07</u>	<u>-72,757.86</u>	<u>0.00</u>
<b>Grand Total</b>					<u>821,834.58</u>	<u>885,949.91</u>	<u>-64,114.53</u>	<u>0.00</u>

This is important tax information and is being furnished to you.

# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

<b>Type or print</b>	Name of Exempt Organization <b>GIFFORD YOUTH ACTIVITY CENTER FOUNDATION, INC.</b>	Employer identification number <b>43-1950913</b>
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions <b>4875 43RD AVENUE</b>	
	City, town or post office, state, and ZIP code For a foreign address, see instructions. <b>VERO BEACH, FL 32967</b>	

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

**TOMAS RENE PEREZ**

- The books are in the care of ▶ **4875 43RD AVENUE - VERO BEACH, FL 32967**  
Telephone No. ▶ **(772) 567-1151** FAX No. ▶ \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶  calendar year **2009** or

▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**2** If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	<b>3c</b>	\$	<b>N/A</b>

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form **8868** (Rev. 4-2009)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box  **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

<b>Part II</b>		<b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed).	
Type or print  File by the extended due date for filing the return See instructions	Name of Exempt Organization	Employer identification number	
	GIFFORD YOUTH ACTIVITY CENTER FOUNDATION, INC.	43-1950913	
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only	
	4875 43RD AVENUE		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions		
	VERO BEACH, FL 32967		

Check type of return to be filed (File a separate application for each return):

- Form 990   
  Form 990-EZ   
  Form 990-T (sec 401(a) or 408(a) trust)   
  Form 1041-A   
  Form 5227   
  Form 8870  
 Form 990-BL   
  Form 990-PF   
  Form 990-T (trust other than above)   
  Form 4720   
  Form 6069

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**TOMAS RENE PEREZ**

• The books are in the care of  **4875 43RD AVENUE - VERO BEACH, FL 32967**  
 Telephone No.  **(772) 567-1151**      FAX No.

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**
- 5 For calendar year **2009**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_
- 6 If this tax year is for less than 12 months, check reason:  Initial return     Final return     Change in accounting period
- 7 State in detail why you need the extension

**INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE TAX RETURN HAS NOT YET BEEN RECEIVED FROM THIRD PARTIES.**

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c	<b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	\$ <b>N/A</b>

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  **Tomas R. Perez** Title  **CPA** Date  **8/11/10**